# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Aug 30, 2004**
**Secretary of State**

DOCUMENT# P03000039763

**Entity Name:** THECUS, CORP.

**Current Principal Place of Business:**

100 KING POINT DR #1218
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

9437 NW 2ND COURT
MIAMI SHORE, FL 33150

**Current Mailing Address:**

100 KING POINT DR #1218
SUNNY ISLES, FL 33160

**New Mailing Address:**

1966 NE 123 STREET
317
NORTH MIAMI, FL 33181

**FEI Number: 32-0071623** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ORIOLO, HERNAND D
100 KING POINT DR #1218
SUNNY ISLES, FL 33160 US

**Name and Address of New Registered Agent:**

ORIOLO, HERNAND D
9437 NW 2ND COURT
MIAMI SHORE, FL 33150 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ORIOLO HERNAND 08/30/2004
Electronic Signature of Registered Agent Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: ORIOLO, HERNAND D
Address: 100 KING POINT DR #1218
City-St-Zip: SUNNY ISLES, FL 33160

Title: VD ( ) Delete
Name: GASPARI, OSCAR A
Address: 9437 NW 2ND CT
City-St-Zip: MIAMI, FL 33150

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition
Name: ORIOLO, HERNAND D
Address: 9437 NW 2ND CT
City-St-Zip: MIAMI, FL 33150

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORIOLO HERNAND PD 08/30/2004
Electronic Signature of Signing Officer or Director Date